



**COUNTY OF LOS ANGELES  
WORKFORCE DEVELOPMENT,  
AGING AND COMMUNITY SERVICES**

**APPENDIX B:  
STATEMENT OF WORK**

**LINKAGES PROGRAM  
2017-2022**

## **STATEMENT OF WORK EXHIBITS**

### **ATTACHMENTS:**

- A PERFORMANCE REQUIREMENTS SUMMARY (PRS) CHART
- B SUBAWARD DISCREPANCY REPORT
- C COUNTY RECOGNIZED HOLIDAYS
- D UNIVERSAL INTAKE FORM
- E FORM LF-1: CARE MANAGEMENT APPLICATION AND INFORMED CONSENT
- F FORM LF-2: LINKAGES AUTHORIZATION TO RELEASE RECORDS
- G FORM LF-3: LINKAGES INITIAL ASSESSMENT
- H FORM LF-4: LINKAGES ASSESSMENT SUMMARY
- I FORM LF-5: LINKAGES REASSESSMENT
- J FORM LF-6: LINKAGES REASSESSMENT SUMMARY
- K FORM LF-7: SERVICE ARRANGEMENT REPORT
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- M EMERGENCY AND DISASTER PLAN BASIC REQUIREMENTS
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## **APPENDIX A**

### **STATEMENT OF WORK LINKAGES PROGRAM 2017- 2022**

#### **1.0 SCOPE OF WORK**

- 1.1 The scope of work outlines the Program Services required to operate the Linkages Program for the provision of Services to eligible Clients as mandated by California Welfare and Institutions Code, Section 9545, Division 8.5, Chapter 7.5, Community-Based Services Programs, the Linkages Program Manual established by the California Department of Aging (CDA) and Workforce Development, Aging and Community Services (WDACS) Program Memoranda/Directives. Subrecipient is obligated to provide the Program Services described herein. The County has established a fixed rate for each Unit of Service provided by Subrecipient.

#### **2.0 ADDITION/DELETION OF FACILITIES, SPECIFIC TASKS AND/OR WORK HOURS**

- 2.1 Prior to modifying or terminating a site, Program Services, or revising hours of service delivery at a previously designated location(s), and before commencing such services at a previously designated location(s), Subrecipient shall obtain written consent from County, and shall comply with Subparagraph 8.1 (Amendments) of Appendix A (Sample Subaward) as applicable.
- 2.2 Subrecipient shall inform County in writing and receive written County approval at least 60 days prior to relocation of Subrecipient's office or site location(s). Subrecipient shall ensure that site locations are open to any eligible individuals, are located in areas where there are demonstrated need or documented demand for Program Services, or where a needs assessment or survey has been conducted. County shall provide a written response within 10 business days of receipt of the notification of site locations.
- 2.3 Subrecipient shall include the identity of each designated community focal point as specified in Older Americans Act (OAA) Section 102 (a)(21), 42 USC 3026(a)(3)(A)). Subrecipient shall utilize Appendix C (Sample Subaward), Exhibit F - Subrecipient's Administration to identify or update the designated focal point site locations, as needed.
- 2.4 Specific Work Requirements as stated in Section 10.0 and work hours shall not be modified or terminated throughout the entire Subaward term. Should an emergent need arise, request for Service or work hour modifications will be reviewed by County (Program Analyst) on a case-by-case basis.

### **3.0 QUALITY CONTROL PLAN**

Subrecipient shall establish and utilize a comprehensive Quality Control Plan to assure County a consistently high level of Service throughout the term of the Subaward. The Plan shall be submitted to the County's Compliance Manager for review every six (6) months or more frequent as imposed by County. The plan shall include, but not be limited to, the following:

- 3.1 Method of monitoring to ensure that Subaward requirements are being met;
- 3.3 A record of all inspections conducted by Subrecipient, any corrective action taken, the time a problem was first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action shall be provided to County upon request.

### **4.0 QUALITY ASSURANCE PLAN**

County will evaluate Subrecipient's performance under this Subaward using the quality assurance procedures as defined in Subparagraph 8.15 (County's Quality Assurance Plan) of Appendix A (Sample Subaward).

#### **4.1 Meetings**

Subrecipient is mandated to attend all scheduled meetings called by County, or authorized designee. Subrecipient shall be given three (3) to five (5) business days advance notice of all scheduled meetings with County. Subrecipient may also be required to attend emergency meetings without the above stated advance notice when necessary.

- 4.1.1 Subrecipient shall complete a sign-in sheet for face-to-face meetings. A roll call will be taken for web conferences. Penalties will apply for Subrecipient's failure to attend either face-to-face or web conferences pursuant to Appendix C (Statement of Work Exhibits), Attachment A (Performance Requirements Summary (PRS) Chart).
- 4.1.2 Subrecipient's staff is also required to regularly attend meetings that offer ways to expand knowledge of and increase efficiency in the Program Services provided. These meetings may be called by County. Subrecipient may also choose to attend meetings outside of Los Angeles County at Subrecipient's own expense that Subrecipient reasonably deems to be beneficial for the delivery of Program Services, as well as other meetings designated by County.

#### **4.2 Subaward Discrepancy Report (Attachment B of Appendix C (Statement of Work Exhibits))**

Verbal notification of a Subaward discrepancy will be made to County's Compliance Manager as soon as possible whenever a Subaward discrepancy is identified. The problem shall be resolved within a time period mutually agreed upon in writing by County and Subrecipient.

The County's Compliance Manager will determine whether a formal Subaward Discrepancy Report shall be issued. Upon receipt of this document, Subrecipient is required to respond in writing to the County's Compliance Manager within five (5) business days, acknowledging the reported discrepancies or presenting contrary evidence. A plan for correction of all deficiencies identified in the Subaward Discrepancy Report shall be submitted to the County's Compliance Manager within five (5) business days.

#### **4.3 County Observations**

In addition to County's subawarding staff, other County personnel, State representatives and Federal representatives may observe performance, activities, and review documents relevant to this Subaward at any time during normal business hours. However, these personnel may not unreasonably interfere with Subrecipient's performance.

### **5.0 DEFINITIONS**

For a listing of Definitions for this Program, refer to Appendix A (Sample Subaward), Exhibit P (Definitions).

### **6.0 RESPONSIBILITIES**

County's and Subrecipient's responsibilities are as follows:

#### **COUNTY**

##### **6.1 Personnel**

County will administer the Subaward according to Appendix C (Sample Subaward), Paragraph 6.0 (Administration of Subaward – County). Specific duties will include:

- 6.1.1 Monitoring Subrecipient's performance in the daily operation of this Subaward.
- 6.1.2 Providing direction to Subrecipient in areas relating to policy, information and procedural requirements.

- 6.1.3 Preparing Amendments in accordance with Subparagraph 8.1 (Amendments) of Appendix A (Sample Subaward).

**6.2 Furnished Items- INTENTIONALLY OMITTED**

**SUBRECIPIENT**

**6.3 Project Manager**-the following are the responsibilities of Project Manager

- 6.3.1 Subrecipient shall hire a full-time Project Manager or designated alternate. County must have access to Subrecipient's Project Manager during all hours, 365 days per year. Subrecipient shall provide a telephone number where the Project Manager may be reached on a twenty-four (24) hours per day basis.
- 6.3.2 Subrecipient shall immediately notify County of any significant change in the status of the Project Manager position. If for any reason the position should become vacant, Subrecipient shall immediately notify County within 24 hours and fill the position with a temporary replacement. Subrecipient shall fill the position with a permanent person within 30 days from vacancy.
- 6.3.3 Project Manager serves as the coordinator/liaison for this Subaward, ensuring that any communications related to the Linkages Program are conveyed to all appropriate personnel. The Project Manager, or their alternate, shall oversee all the daily activities.
- 6.3.4 Project Manager or their designated alternate shall have full authority to act for Subrecipient on all matters relating to the daily operation of the Subaward.
- 6.3.5 The Project Manager will plan, organize and direct all administrative and Program activities related to the Subaward. The Project Manager will define lines of authority and will develop the roles and parameters of responsibility for Program staff consistent with established County requirements.
- 6.3.6 If the Project Manager also acts as the Clinical Supervisor, the Project Manager shall also meet the requirements specified in SOW Section 6.4.3 and be charged with the additional responsibilities as specified in Section 6.4.2, Clinical Supervisor.
- 6.3.7 The Project Manager or designee shall regularly attend all meetings called by the AAA.
- 6.3.8 The Project Manager shall develop and submit all written Corrective Action Plans to the County.

- 6.3.9 Minimum Education, Experience and Qualifications: Project Manager must possess and demonstrate all of the following:
- 6.3.9.1 The Project Manager shall have a bachelor's degree from a university accredited by a regional accrediting association in the United States;
  - 6.3.9.2 A minimum of five (5) years of administrative experience in the Social or Behavioral Sciences;
  - 6.3.9.3 Ability to speak, read, and understand English fluently;
  - 6.3.9.4 Ability to explain administrative and programmatic goals, policies, and procedures, and assist staff in adjusting to changes that occur;
  - 6.3.9.5 The Project Manager must be able to provide guidance on decisions requiring judgment, assistance with problem situations, and approval of care plans and discharge;
  - 6.3.9.6 The Project Manager must be able to evaluate the performance of Care Managers based on County established criteria.
  - 6.3.9.7 The Project Manager must have expertise in the provisions of the Linkages Program Services or services which are substantially similar to Linkages Program Services.

#### **6.4 Personnel**

- 6.4.1 Subrecipient shall assign a sufficient number of qualified employees with the appropriate education, training, certification, licensure, and experience noted below to perform the required work. Subrecipient's staff must be capable of establishing effective communication with the Clients as well as other AAA network providers. Subrecipient shall always have a staff member that speaks and understands English with the authority to act on behalf of Subrecipient in every detail available during workhours. Subrecipient shall operate continuously throughout the entire term of this Subaward with at least the minimum number of staff set forth herein, as well as any other applicable staffing requirements County deems necessary for Subrecipient to provide Program Services hereunder. Such personnel shall meet all qualifications in the Subaward, as well as those provided by County through Subaward Amendments, Administrative Directives and Program Policy Memorandums. Subrecipient shall conduct a background check on any staff, volunteer, and student Intern that has direct Client contact and has access to the Client's personal information and/or case file.



- 6.4.2 Clinical Supervisor - The following are the responsibilities of the Clinical Supervisor:
  - 6.4.2.1 The Clinical Supervisor is responsible for all Client Service functions and must review and sign off on all Care Plans and ensure that the Annual Reassessment is adequate for the Client.
  - 6.4.2.2 The Clinical Supervisor shall ensure that monitoring contacts (as described in Section 10.9 of this Statement of Work) are made more frequently than quarterly for a Client whose condition requires closer supervision and shall approve the Monitoring schedule set by the Care Manager.
  - 6.4.2.3 The Clinical Supervisor may also act as the Project Manager. If acting as the Project Manager, the Clinical Supervisor shall also be charged with the additional responsibilities as specified in SOW Section 6.3 (Project Manager).
  - 6.4.2.4 The Clinical Supervisor shall directly supervise the Care Managers and Student Interns.
  - 6.4.2.5 The Clinical Supervisor must work on the Linkages Program a minimum of eight (8) hours per week and must be available to Care Managers on a daily basis.
- 6.4.3 Clinical Supervisor - The following are the minimum qualifications of the Clinical Supervisor:
  - 6.4.3.1 The Clinical Supervisor must have at least a master's degree in Social or Behavioral Science and at least two years of previous related experience.
- 6.4.4 Care Manager - The following are the responsibilities of the Care Manager:
  - 6.4.4.1 The Care Manager must conduct Client Intake/Screening and Assessment responsibilities, evaluate the potential Client to assess their needs, develop a Care Plan, coordinate the provision of Program Services, conduct Client Follow-up/Monitoring, and conduct Reassessment.
  - 6.4.4.2 For Clients who are exiting a care facility (nursing home facilities and acute care facilities), the Care Manager shall coordinate with the care facility discharge planner to conduct an Initial Assessment and assess the Client for Linkages eligibility. Subrecipient shall conduct a Reassessment to

determine the needs of the Client upon Client's return to the home setting.

6.4.4.3 The Care Manager shall prepare a formal, written Care Plan with measurable outcomes in order to accomplish the Program's intent for each Client.

6.4.4.4 After the Client is situated in the home, the Care Manager must conduct a Reassessment consistent with Section 10.10 of this Statement of Work, to determine any additional needs of the Client. The Care Manager is also responsible for completing Attachment D (Universal Intake Form (UIF)) of Appendix C (Statement of Work Exhibits) and Attachment J (Linkages Reassessment Summary – Form LF-6) of Appendix C (Statement of Work Exhibits).

6.4.4.5 The Care Manager shall coordinate the Informal Support Services, Arranged Services, and Purchase of Services for all Clients, as described in SOW Section 10.8.

6.4.5 Care Manager - The following are the minimum qualifications of the Care Manager:

6.4.5.1 The Care Manager must have a bachelor's degree in Social or Behavioral Sciences or a related field or possess a Registered Nurse (R.N.) license;

6.4.5.2 The Care Manager must have a minimum of two (2) years of experience in social services or related field;

6.4.5.3 The Care Manager may substitute one (1) year of education in the Social or Behavioral Sciences, or a related field, beyond a Bachelor's degree for each year of experience required.

6.4.6 Student Interns - The following are the responsibilities of the Student Interns:

6.4.6.1 Subrecipient may utilize Student Interns by allowing them to assist with the Linkages Program Services; however, the Clinical Supervisor or Care Manager shall closely supervise Student Interns at all times.

6.4.6.2 The Student Interns may assist with Progress Notes. However, all documents must be co-signed by a Care Manager, the Clinical Supervisor, or the Project Manager.

6.4.7 Student Interns - The following are the minimum qualifications of the Student Interns:

6.4.7.1 The Student Interns must be enrolled in school in the field of Social or Behavioral Sciences at the Bachelor's level or Master's level.

6.4.8 Support Staff:

6.4.8.1 The Support Staff shall perform all clerical, fiscal, and data entry.

6.4.9 Senior Community Service Employment Program (SCSEP) Title V Participants:

6.4.9.1 Subrecipient shall utilize the services of SCSEP Title V Participants at Linkages sites whenever possible.

6.4.9.2 SCSEP Title V Participants must be appropriately trained and qualified for the responsibilities assigned prior to beginning those responsibilities.

6.4.9.3 Subrecipient shall conduct a background check on any Title V Participant that has direct Client contact or direct access to the Client's personal information and/or case file.

6.4.10 Volunteers:

6.4.10.1 Subrecipient has the option of utilizing volunteers. However, if Subrecipient utilizes this option, volunteers must be appropriately qualified and supervised by the Project Manager, Clinical Supervisor, and/or Care Manager. If possible, Subrecipient shall work in coordination with organizations that have experience in providing training, placement, and stipends for Volunteers (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in a community service setting.

## **6.5 Identification Badges**

6.5.1 Subrecipient shall ensure their employees are appropriately identified as set forth in Suparagraph 7.4 (Subrecipient's Staff Identification of Appendix A (Sample Subward).

## **6.6 Multilingual and Multicultural Capabilities of Subrecipient Staff**

- 6.6.1 Subrecipient must provide Program Services in the primary/native language of the Client or in areas where a significant number of Clients do not speak English as their primary language. Subrecipient shall make efforts to employ staff and recruit volunteers who are bilingual or who are fluent in the dominant languages of the community. Subrecipient shall not require any Client to provide his/her own interpreter.
- 6.6.2 Subrecipient must be committed and sensitive to the delivery of Program Services that are culturally and linguistically appropriate. To that end, Subrecipient must seek to hire qualified staff that is multilingual and/or multicultural in order to better reflect the communities served.
- 6.6.3 In addition, Subrecipient and its employees, including volunteers, are expected to develop cultural competency and cross-cultural clinical practice skills. Subrecipient must also develop effective linkages with various ethnic, health and social service agencies for the benefit of Clients to reflect the ethnic and cultural needs of the community being served.

## **6.7 Materials and Equipment**

- 6.7.1 The purchase of all materials/equipment to provide the needed Program Services is the responsibility of Subrecipient. Subrecipient shall obtain approval by County prior to purchase. Subrecipient shall use materials and equipment that are safe for the environment and safe for use by the employee.
- 6.7.2 All employees shall be trained in their assigned tasks and in the safe handling of equipment, if applicable. All equipment shall be checked daily for safety. All employees must wear safety and protective gear according to Occupational Safety and Health Administration (OSHA) standards.

## **6.8 Training**

- 6.8.1 Subrecipient shall provide training programs for all new employees and continuing in-service training for all employees. Subrecipient is responsible for ensuring its staff, including employees, student interns and volunteers, both existing and new, are properly trained in all areas related to providing Linkages Services. Staff must be qualified, sufficient in number to deliver the Service(s) adequately, and capable of establishing effective communication with the Clients as well as other AAA network Subrecipients.

- 6.8.2 Subrecipient shall develop and implement an internal staff training policy, including the provision of an orientation to all new staff (which shall include employees, student interns and volunteers).
- 6.8.3 Subrecipient Project Manager shall ensure that all appropriate Subrecipient's employees, student interns and volunteers attend all training sessions as required by County, held at a County facility or another site, as determined by County for Subrecipient's benefit. Further, Subrecipient shall ensure that, at a minimum, a Subrecipient's designated, paid employee represents Subrecipient at each training session. Subrecipient may also choose to attend educational training opportunities outside of Los Angeles County at Subrecipient's own expense that Subrecipient reasonably deems to be beneficial for the delivery of Client Services, as well as other trainings designated by County.
- 6.8.4 The In-Service Training shall include, but is not limited to, providing information concerning new directives and regulations issued by County. County will provide relevant and applicable In-Service Training, including instruction and guidance as determined by County to Subrecipient.
- 6.8.5 Subrecipient staff is also required to regularly attend trainings that offer ways to expand knowledge of and increase efficiency in the Program Services provided. These trainings may be called by AAA and held at a County facility or another site as determined by County.
- 6.8.6 Subrecipient shall attend all mandated trainings called by County, or authorized designee. Mandated trainings may be held at a County facility, at another site, or online. Subrecipient shall be given three (3) to five (5) business days advance notice of all scheduled trainings with County. Subrecipient may also be required to attend emergency trainings without the above stated advance notice when necessary. Failure to attend all mandated trainings shall be considered non-compliance with this Subaward, and may result in further action pursuant to Subparagraph 9.13 (Probation and Suspension) of Appendix A (Sample Subward), and any other applicable remedies.
- 6.8.7 Subrecipient is to maintain written documentation of all training, including but not limited to: agendas, topics, training materials, training evaluations, and attendance records/sign-in sheets, which include both printed names and signatures. Subrecipient shall make training records available for inspection by County or State representatives upon request.
- 6.8.8 Security Awareness Training: Subrecipient shall ensure that Subrecipient employees and volunteers who handle personal, sensitive

or confidential information relating to the Program complete the Security Awareness Training module located at [www.aging.ca.gov](http://www.aging.ca.gov) within 30 calendar days of the start date of this Subaward or within 30 calendar days of the start date of any new employees or volunteer who work under this Subaward.

6.7.8.1 Subrecipient shall maintain certificates of completion of Security Awareness Training on file and provide them upon request by County or State representatives.

## **6.9 Subrecipient's Office**

- 6.9.1 Subrecipient shall maintain a physical office in Los Angeles County with a telephone in the company's name where Subrecipient conducts business. The office shall be open and staffed a minimum eight (8) hours per day during the hours of 8:00 a.m. to 5:00 p.m., Monday through Friday, by at least one (1) employee who can respond to inquiries and complaints which may be received about Subrecipient's performance of the Subaward. When the office is closed during non-business hours, an answering service shall be provided to receive calls. Subrecipient shall answer calls received by the answering service within forty-eight (48) hours of receipt of the call. Subrecipient shall always have a staff member with the authority to act on behalf of Subrecipient available during work hours.
- 6.9.2 Subrecipient shall publicly display at all Subrecipient office location/sites the days and hours of operation for the provision of Subawarded Program Services.
- 6.9.3 Subrecipient shall ensure that availability of Services is appropriate for the demographics associated with the service area (site or office location).
- 6.9.4 Subrecipient shall ensure that all site locations, buildings, and surrounding areas are maintained in a manner consistent with applicable local, State, and federal occupational safety and sanitation laws and regulations. The premises shall be free of any accumulation of garbage, rubbish, stagnant water, and filthy or offensive matter of any kind to ensure that the premises are maintained in a clean and wholesome condition. The physical locations shall be acceptable and accessible to the public. Subrecipient shall comply with the Americans with Disabilities Act of 1990, as amended.
- 6.9.5 Subrecipient shall observe all applicable local, State, and Federal health and safety standards. Subrecipient shall ensure that all Clients and Subrecipient employees, student interns and volunteers in a position not covered under the Occupational Safety and Health Act of 1970, as

amended (29 USC Section 651 et seq.), and/or the California Occupational Safety and Health Act as amendment (California Labor Code Section 6300 et Seq.), are not required or permitted to work, be trained, or receive Services under working conditions that are unsanitary, hazardous or otherwise detrimental to a person's health or safety.

## **6.10 Collaborations**

6.10.1 Subrecipient must form collaborations with County and City of Los Angeles Subrecipients providing services funded through the OAA, including other community organizations in order to ensure comprehensive and coordinated service delivery and to prevent unnecessary duplication of Program Services. Subrecipient is encouraged to share vital assessment information with other agencies providing services to the Client in the home. However, in sharing information with other agencies, Subrecipient must respect Client confidentiality rights, adhere to applicable confidentiality regulations, and follow appropriate protocols.

6.10.2 Subrecipient shall establish procedures to protect all Client information consistent with the terms of this Subaward and all applicable laws, regulations, and any amendments thereto. Subrecipient must have written procedures to protect the confidentiality and privacy of Client information collected for purposes of the Program, in accordance with all applicable laws and regulations, including Title 22 CCR 7500(b). Subrecipient shall not disclose Client information without written consent from County and the Client.

## **7.0 HOURS/DAYS OF WORK**

7.1 Subrecipient's staff shall be available to all Clients, potential Clients, referral sources, as well as County on a minimum five (5) days per week (Monday through Friday) basis, eight (8) working hours per day for the hours of 8:00 a.m. to 5:00 p.m. (not including County recognized holidays). A list of County recognized holidays is provided in Appendix B (Statement of Work Attachments) Attachment C (County Recognized Holidays).

7.2 Subrecipient is to provide County advance written notice and request prior approval from County in writing for any site closure or disruption of Services for any non-County recognized holidays (i.e., vacations, city shut-downs or religious holidays). This notice is to state the date and reason for the closure and to provide an action plan to ensure that delivery of Services is not disrupted. An action plan must be approved by County prior to implementation.

7.3 Subrecipient shall also ensure that personal telephone contact with Subrecipient's staff is available to Clients, potential Clients, as well as County,



during Subrecipient's hours of operation. Subrecipient shall also ensure that each office location has a telephone answering machine or voice mail in place during off-business hours. Subrecipient's staff shall check and respond to all messages in a timely manner but not to exceed forty-eight (48) hours within receipt of the call.

- 7.4 Subrecipient's hours of operation, Program schedules, and contact information shall be included in relevant, printed outreach materials such as flyers and posters.

## **8.0 WORK SCHEDULES**

- 8.1 Subrecipient shall submit for review and approval a work schedule for each facility to the County's Program Manager within fourteen (14) business days prior to starting work. Said work schedules shall be set on an annual calendar identifying all the required on-going specific tasks and task frequencies. The schedules shall list when the tasks will be performed by, time frames, day of the week, and month.
- 8.2 Subrecipient shall submit revised schedules when actual performance differs substantially from planned performance. Said revisions shall be submitted to the County's Program Manager for review and approval within fourteen (14) business days prior to scheduled time for work.
- 8.3 County may request, at its sole discretion, a deviation of regular work schedule to address site/task demands.
- 8.4 In the event of extraordinary incidents, unusual occurrences, natural disasters or crime, including but not limited to repairs, modifications, refurbishment, fumigation, or replacement of facility(ies), vandalism, acts of God, and third party negligence, Subrecipient must have an emergency plan in place to ensure that there is no disruption in Program Services.

## **9.0 UNSCHEDULED WORK**

- 9.1 County's Program Manager or designee may authorize Subrecipient to perform unscheduled work, including, but not limited to, repairs and replacements when the need for such work arises out of extraordinary incidents such as vandalism, acts of God, and third party negligence; or to add to, modify or refurbish existing facilities. In the event of an emergency, County may request at its sole discretion, that Subrecipient provide Services beyond regular hours of operation.
- 9.2 Prior to performing any unscheduled work, Subrecipient shall prepare and submit a written description of the work with an estimate of labor and materials. If the unscheduled work exceeds Subrecipient's estimate, County Project Manager or his designee must approve the excess cost for County facilities and/or equipment.



In any case, no unscheduled work shall commence without written authorization from County.

- 9.3 When a condition exists wherein there is imminent danger of injury to the public or damage to property, Subrecipient shall contact County's Contract Manager for approval before beginning the work. A written estimate shall be sent within twenty-four (24) hours for approval. Subrecipient shall submit an invoice to County's Contract Manager within five (5) working days after completion of the work.
- 9.4 All unscheduled work shall commence on the established specified date. Subrecipient shall proceed diligently to complete said work within the time allotted.
- 9.5 County reserves the right to perform unscheduled work itself or assign the work to another Subrecipient.

## **10.0 SPECIFIC WORK REQUIREMENTS**

This section contains guidelines that include the definitions and standards for the provision of Program Services that are required by the Linkages Program. The Unit of Service is defined as the quantified benefit provided to a Client that meets the Program guidelines. County has established a fixed reimbursement rate for each Unit of Service provided by Subrecipient. The Unit of Measurement is the representation of the output (benefit/service) provided to each Client. The Unit Rate is the amount that is payable by the Program for each Unit of Service provided by Subrecipient. Program Services, its respective Unit of Measurements, and Unit Rates are identified in SOW Section 10.15.12.1.

- 10.1 The Linkages Program is intended to prevent premature or inappropriate institutionalization of at risk individuals aged eighteen (18) years and older, by providing Care Management as well as comprehensive information and assistance to individuals and their families about the availability of community resources. The Program is designed to be a gap filler which assist individuals who are at risk of institutionalization.
- 10.2 The Linkages Program provides comprehensive Care Management. Care Management is "a system under which responsibility for locating, coordinating, and monitoring a group of Services rests with a designated person or organization" (Consolidated Omnibus Budget Reconciliation Act (COBRA) 1985). The Program provides assistance to eligible Clients in transition into entering or returning home from a nursing home facility. In addition, the Program will consist of providing Intake/Screening, Assessment, Monitoring/Follow-up, Reassessment, Informal Services/Arranged Services/Purchase of Services, and Termination of eligible Clients.

- 10.3 Subrecipient is required to make the Linkages Manual available to all Linkages Program staff. The Manual is available on the WDACS website: <http://css.lacounty.gov/aaa-manuals/>. All of the Linkages Program forms to be used for the Program are included in Appendix B (Statement of Work Attachments).

10.4 **Eligibility Criteria**

In order to be eligible for Linkages Program Services and be considered a Client, an individual must meet all of the criteria specified herein:

10.4.1 Be eighteen (18) years of age or older;

10.4.2 Reside in Los Angeles County;

10.4.3 Must not currently receive any other duplicative Care Management or Case Management services from another CDA Planning Service Area (PSA), or another Area Agency on Aging (AAA) Subrecipient providing Care Management, Case Management, and/or Linkages Program Services;

10.4.4 Be considered “at risk of institutionalization.” To be considered at risk of institutionalization, an individual must meet at least one of the following conditions:

10.4.4.1 Be unable to perform at least one (1) or more Activities of Daily Living (ADL), which include: bathing, toileting, dressing, feeding, breathing, transferring and mobility, and associated tasks, without substantial human assistance including verbal reminding, physical cuing, or supervision; or

10.4.4.2 Be unable to perform two (2) or more Instrumental Activities of Daily Living (IADLs). These include: light and heavy housework, shopping, ability to access transportation, meal preparation, using the telephone, managing medications, and managing money; or

10.4.4.3 Be unable to manage his/her own affairs due to emotional and/or cognitive impairment; or

10.4.4.4 Be impaired by virtue of a significant event or circumstance that occurred within the last twelve (12) months.

10.4.4.5 Be able to reside independently in the community through the use of Linkages Program Services; and

- 10.4.4.6 Have a need for Care Management and be willing to participate in the Program.
- 10.4.5 Prospective Clients shall be eligible for Program Services based solely on the above Eligibility Criteria as determined through the Intake/Screening and the Assessment processes.
- 10.4.6 Subrecipient shall also serve residents of Residential Care Facilities (nursing facilities or acute care hospitals).
- 10.4.7 Residents of Residential Care Facilities who meet the requirements listed in Statement of Work (SOW) Section 10.4 are eligible for Linkages Program Services if the Client is scheduled to be discharged within thirty (30) to sixty (60) days from the date of the referral. This allows Subrecipient to arrange the necessary Program Services prior to the day of discharge, so that the Program Services will be in place when the Client returns home, making the transition easier for the Client.
- 10.4.8 For individuals referred by Residential Care Facilities, Subrecipient shall screen and assess for Linkages eligibility prior to their discharge from the facility. Subrecipient shall coordinate with the facility's discharge planner to determine the needs of the Client upon return to the home setting.
- 10.4.9 Once the Client is enrolled into the Linkages Program, Purchase of Services (POS) funds may be expended by Subrecipient to arrange POS. If the POS funds are continued beyond sixty (60) days due to unusual circumstances, prior County approval is required.
- 10.4.10 After the Client is situated in the home (the Client's home following discharge from the Residential Care Facility) , a Reassessment must be conducted, by the Care Manager, in the home setting to determine any additional needs of the Client.
- 10.4.11 Specific conditions or situations such as substance abuse or chronic mental illness shall not be a deterrent to Linkages Program Services if the eligibility criteria can be met.
- 10.4.12 Subrecipient shall make every reasonable effort to avoid duplication of Linkages Program Services.
- 10.4.13 Subrecipient shall not limit the length of time Clients may remain in the Program as long as the need for Linkages Program Services exists, the eligibility criteria continues to be met, and funding is available.

- 10.4.14 Subrecipient shall make every reasonable effort to provide services to individuals who are in the Greatest Economic and/or Social Need. Greatest economic need is the need resulting from an income level below the poverty guideline. The greatest social need is the need caused by non-economic factors which include (a) physical and mental disabilities; (b) language barriers; and (c) cultural, geographic isolation, including isolation caused by racial or ethnic status that restricts the ability of an individual to perform daily tasks or threatens the capacity of the individual to live independently.

## 10.5 Intake/Screening

- 10.5.1 Linkages Program processes shall begin with an individual contacting Subrecipient to request Program Services.
- 10.5.2 Subrecipient shall complete a Universal Intake Form (UIF) to determine the eligibility of each potential Client for the purpose of enrollment into the Linkages Program. The UIF must be completed in its entirety. This process shall be used to collect Client demographics, the referral source, assessment and information on a Client's physician and the emergency contact.
- 10.5.3 If a potential Client is determined by Subrecipient to be ineligible after the Intake/Screening process is complete, Subrecipient shall refer that person to any other appropriate resources available in the community which may be of help. These referrals and other information relevant to the disposition, such as reason the individual was found ineligible, should be documented in writing by Subrecipient and filed pursuant to record retention policies outlined in Appendix C (Sample Subaward) Paragraph 8.38 (Record Retention, Inspection, and Audit Settlement).
- 10.5.3.1 Subrecipient shall not submit invoices for individuals who do not meet client-eligibility criteria as listed in Section 10.4.
- 10.5.4 Prior to receiving Program Services, Subrecipient shall ensure a Client signs the Care Management Application and Informed Consent form (LF-1) (Attachment E of Appendix C - SOW Exhibits). If a potential Client refuses to sign the Care Management Application and Informed Consent form, Subrecipient shall explain to the potential Client that he/she is thereby refusing Program Services. If the potential Client agrees to sign the Care Management Application and Informed Consent Form (LF-1), Subrecipient shall provide a copy of the signed form to the Client and place the original forms in the Client's file.

10.5.5 Subrecipient shall explain the range of Program Services available to the potential Client before Assessment, as described below in Section 10.6, begins. Subrecipient must explain to each potential Client that in order to participate in the Linkages Program, the potential Client must provide informed consent. Each potential Client shall be informed that signing the Linkages Authorization to Release Records form (LF-2) (Attachment F of Appendix C - SOW Exhibits) gives consent to Subrecipient to share Client's personal information that is relevant and directly related to Program Services with Linkages Program staff, other providers of Linkages Program Services, other AAA Subrecipients, and/or other relevant individuals for a period of one year from the date of initial consent. Each year thereafter, Subrecipient shall obtain another Linkages Authorization to Release Records form signed by each Client prior to continuing Program Services.

## 10.6 Assessment

10.6.1 The purpose of the Assessment process is to gather information on each Client's physical, psychological, and medical history that will be used to develop a Care Plan with each Client and other appropriate persons. In performing the Assessment, Subrecipient shall complete and keep in each Client Record the following Assessment forms, in addition to the documents listed in SOW Section 10.19:

- Universal Intake Form – Attachment D of Appendix C (SOW Exhibits)
- Linkages Initial Assessment form (LF-3) – Attachment G of Appendix C (SOW Exhibits): Subrecipient shall record the Client's enrollment/closing date, assessment date, educational attainment, income level, sources/effectiveness of formal and informal support, psychological functioning, signs of abuse, and general health.
- Linkages Assessment Summary form (LF-4) – Attachment H of Appendix C (SOW Exhibits): Summation of Initial Assessment.

10.6.2 Universal Intake Form (Attachment D of Appendix C – SOW Exhibits) shall be completed and all information captured from the UIF shall be entered into the Management Information System (MIS) within fourteen (14) calendar days of Subrecipient's initial contact with a Client and prior to service delivery.

- 10.6.3 Linkages Clients have the right to refuse specific Program Service(s). However, when a Client refuses a Program Service(s), Subrecipient shall address the risks associated with the refusal of Program Service(s) with the Client and document the discussion in the Care Plan.
- 10.6.4 Subrecipient's Care Manager shall conduct and complete the Linkages Initial Assessment form (LF-3) (Attachment G of Appendix C – SOW Exhibits) during a home visit with the potential Client. When appropriate, a Responsible Other and/or Informal Support, defined below, may be in attendance. Initial Assessment shall be conducted within fourteen (14) calendar days of initial contact.
- 10.6.4.1 A Responsible Other, for the purposes of the Linkages Program, is defined as a person designated by the Client to act on behalf of the Client.
- 10.6.4.2 Informal Support, for the purposes of the Linkages Program, refers to those family members, friends, church volunteers, etc. who assist the Client without compensation.
- 10.6.5 If the potential Client is in a nursing home facility or an acute care hospital, prior to the potential Client's discharge, Subrecipient shall coordinate with the nursing home facility's discharge planner to complete the Universal Intake Form (Attachment D of Appendix C – SOW Exhibits) and the Linkages Initial Assessment form (LF-3) (Attachment G of Appendix C – SOW Exhibits). However, after discharge, a Reassessment must be conducted in the potential Client's home. Subrecipient shall place the Universal Intake Form (Attachment D of Appendix C – SOW Exhibits), Linkages Initial Assessment form (LF-3) (Attachment G of Appendix C – SOW Exhibits), and Linkages Reassessment form (LF-5) (Attachment I of Appendix C – SOW Exhibits) in the Client File.
- 10.6.6 Subrecipient's Care Manager must also complete the Linkages Assessment Summary (LF-4) (Attachment H of Appendix C – SOW Exhibits) for each Client no later than one (1) week from the completion of the Linkages Initial Assessment form (LF-3) (Attachment G of Appendix C – SOW Exhibits). The Assessment Summary is a narrative statement which briefly outlines important facts and observations related to the Client (e.g. Client Description, Health Status, Client Functioning, Cognitive/Psychosocial, Environmental Safety, Finances, Client/Family Concerns, etc.).

10.6.7 A Cognitive Assessment is a specific type of exam that shall be performed by the Care Manager if the Care Manager receives information from the Client's caregiver or physician that the Client is showing signs of memory loss or that the Client has been diagnosed with Alzheimer's disease or dementia. Care Manager shall determine if the Client requires additional Program Services in order to remain at home or that the Client's condition reflects that he/she requires short term or long-term institutionalization.

10.6.7.1 If the Care Manager either (1) observes directly that the Client is showing signs of memory loss or (2) receives information from the Client's caregiver or physician that the Client is showing signs of memory loss or has been diagnosed with Alzheimer's disease other dementia, Subrecipient will perform a Cognitive Assessment. All Cognitive Assessments and observations shall be written in the case notes and placed in the Client's file.

10.6.7.2 A Cognitive Assessment is the process of systematically gathering test scores and related data in order to make judgments about an individual's ability to perform various mental activities involved in the processing, acquisition, retention, conceptualization, and organization of sensory, perceptual, verbal, spatial and psychomotor information. An example of a Cognitive Assessment is the Folstein Mini-Mental Status Exam (MMSE) that may be used to collect information on the Client's mental functioning. The use of the MMSE is not required. The MMSE is copyrighted material. Subrecipient may use similar Cognitive Assessment exams, such as the Screening Examination for Cognitive Impairment (SEFCI) and the Repeatable Battery for the Assessment of Neuropsychological Status (RBANS).

10.6.8 If a Client's behavior indicates a significant threat to their health and well-being, such as a Client is malnourished, suicidal, etc., Subrecipient shall immediately contact local emergency services (e.g., Local Law Enforcement, Fire Department, etc.). Subrecipient shall take the appropriate action and document the following information in the Client's file:

10.6.8.1 A description of the situation;



- 10.6.8.2 An explanation of the cause(s) of concern;
- 10.6.8.3 The possible negative consequences to the Client and/or others.

10.6.9 Once the appropriate action has been taken and the above information is documented in the Client's file, Subrecipient shall immediately notify the Adult Protective Services (APS) division of WDACS and report the Client's significant threat and/or risk, as required by the Welfare and Institutions Code, Section 15630. All Linkages Program staff participating in the provision of Services are considered Mandated Reporters.

## 10.7 Care Planning

- 10.7.1 Subrecipient shall prepare a formal, written Care Plan with each Client and shall include measurable outcomes in order to accomplish the Program's intent. The Care Plan, which shall be developed by the Care Manager and Client, shall be co-signed by the Clinical Supervisor, and placed in each Client's file within two weeks after the date of Assessment.
- 10.7.2 Subrecipient shall keep all Client files in a central location and retain files for a minimum period of five (5) years.
- 10.7.3 The Care Plan serves as an agreement between each Client and Subrecipient. The Care Plan addresses the Client's needs and problems and incorporates the Program Services that are needed to enhance the current support system.
- 10.7.4 Program Services for each Client arranged by the Care Manager must be identified and approved in the Care Plan.
- 10.7.5 The original Care Plan and any revisions to it must be approved by each Client or their Responsible Other. The Clinical Supervisor and/or Project Manager must review and sign off on all Care Plans.
- 10.7.6 Clients have the right to refuse specific Program Service(s). However, when a Client refuses a Program Service(s), Subrecipient shall address the risk(s) associated with the refusal of Program Service(s) with the Client and document the discussion in the Care Plan.
- 10.7.7 The format of the Care Plan can be determined by the Subrecipient. However, the Care Plan shall include and identify:



- 10.7.7.1 Problem areas which illustrate the need for Linkages Program Services;
  - 10.7.7.2 Appropriate Program Services to be arranged; and
  - 10.7.7.3 Desired outcomes.
- 10.7.8 The format of the Care Plan should allow for ongoing updating and indicate status of each Client's needs and services provided.
- 10.7.9 Subrecipient shall continually prepare progress notes and include them in the Care Plan. The progress notes are the ongoing chronology of each Client's record. The progress notes should address the provision of Program Services as planned; whether Program Services are being delivered as anticipated, and whether Program Services continue to be necessary and appropriate. Progress Notes shall include the following, as appropriate:
- 10.7.9.1 The type and frequency of Subrecipient staff contact with each Client (whether the contact was a home visit, telephone call, quarterly home visit, reassessment, etc. must be specified);
  - 10.7.9.2 A record of all events which affect the Client (e.g., hospitalization, collateral contacts with other agencies, etc.);
  - 10.7.9.3 Evaluative comments from Care Manager on Program Services delivered; and
  - 10.7.9.4 A reflection of the relationship between identified problems and Program Services delivered or not delivered.
  - 10.7.9.5 Progress notes will also include any significant information regarding the Client's relationship with family, community, or any other information which would impact on the established goals for the Client's independent living. All entries must be dated and signed by the Care Manager.
- 10.7.10 If Client's behavior indicates a significant threat to their health and well-being, Subrecipient shall document the following in the Care Plan:
- 10.7.10.1 A description of the Client's preference(s) of care;

10.7.10.2 Possible interventions to minimize the potential risk(s) associated with the Client's action;

10.7.10.3 A description of the Program Services or interventions, if any, and follow-up actions, that will be provided to accommodate the Client's choice or minimize the potential risk;

10.7.10.4 Frequency of reassessment of risk; and

10.7.10.5 The final agreement, if any, reached by all involved parties.

10.8 Informal Support Services / Arranged Services / Purchase of Services (POS)

10.8.1 Subrecipient shall use Informal Support Services, Arranged Services, and/or Purchase of Services (POS) in order for the Client to remain in his/her home. Subrecipient shall apply the Linkages Program as a brokerage model Care Management program, which means that Program Services are provided to the Client through Subrecipient's referral to service agencies and other local resources at no cost to the Program. Due to the limited dollars in the Program, Subrecipient shall utilize POS for Clients only when all other avenues to secure Program Services at no cost have been exhausted.

10.8.2 Subrecipient shall provide the coordination of Informal Support Services, Arranged Services, and Purchase of Services, but shall not provide the service directly.

10.8.3 Program Services arranged by Care Managers must be identified in the Care Plan and approved by the Clinical Supervisor and/or Project Manager.

10.8.4 There are three basic types of Program Services utilized to maintain Clients in their homes: Informal Support Services, Arranged Services, and Purchase of Services. These Program Services should be arranged giving priority in the above order.

10.8.4.1 Informal Support Services

10.8.4.1.1 Informal Support Services are Program Services provided to each Client by family members, friends, church volunteers, etc. without compensation, so the Client may remain at home. Subrecipient shall coordinate Program Services with the

Client's informal support network (family members, friends, church volunteers, etc.) and ensure, through monthly phone calls or home visits, that required Program Services are in place and consistent with the Care Plan.

#### 10.8.4.2 Arranged Services

10.8.4.2.1 Arranged Services are those Program Services that are the result of referrals to each Client by Subrecipient at no cost to the Program. The Care Manager must coordinate all Arranged Services in the community for which a Client is eligible. Arranged Services include, but are not limited to, services such as Medicare (Title XVIII); Medi-Cal (Title XIX), In-Home Supportive Services (IHSS)(Title XX). Older Americans Act (Title III), and other publicly funded service.

10.8.4.2.2 In addition to the publicly funded resources, the Care Manager shall coordinate with all other agencies referred to provide Arranged Services to each Client.

10.8.4.2.3 Subrecipient shall report all Arranged Services using the Service Arrangement Report (SAR) form (LF-7) (Attachment K of Appendix C – SOW Exhibits). This form is used to report those Program Services to which Clients are referred and there is no cost to the Linkages Program or Subaward or to other funding sources as shown in the Budget and/or Closeout Report. If the Subaward or other funds pay a portion of the Program Service cost and a Client pays a portion, Subrecipient's share is reported as a Purchase of Services. If a Client pays for the entire Program Service cost it is considered an Arranged Service.

#### 10.8.4.3 Purchase of Services (POS)

10.8.4.3.1 POS is a Program Service intended to meet a Client's needs that cannot be met through Informal Support Services or Arranged Services. Often a Client's capacity to remain in a home setting is based on having Program Services in place. Subrecipient shall coordinate and arrange for each Client all necessary POS based upon the POS categories listed below in order to reduce the risk of institutionalization. Subrecipient shall ensure that the required POS are in place and consistent with the Care Plan.

10.8.4.3.2 The following are service category definitions applicable to POS:

- a) *Adult Day Care*: Community-based centers that provide non-medical care to Clients requiring a variety of social, psychosocial, and related support services, and for adults in need of personal care services, supervision, or assistance essential for sustaining the activities of daily living are provided in a protective setting on less than a 24-hour basis.
- b) *Alzheimer's Day Care Resource Center*: Community-based centers that provide day care for Clients in the moderate to severe stages of Alzheimer's disease or other related dementias, and provide various resource services for family caregivers and the community-at-large.
- c) *Adult Day Health Care*: Provides personal care, nutrition, therapy, health care, socialization, and recreation to Clients in a facility licensed by the California Department of Social Services, Community Care Licensing Division (CCL).
- d) *Respite*: Provides supervision and care of Clients while the person(s), who normally provides full-time care, takes short-term relief or respite.

- e) *Transportation:* Provides Client transportation services, including bus, dial-a-ride and cab, to various health appointments and social resources. Transportation provider must have valid vehicle insurance and a valid and appropriate California Driver's License.
- f) *Housing Assistance:* Provides assistance to Clients in securing living arrangements. Provides minor home repairs and/or permanent modifications, e.g. permanent ramp, widening doorways necessary to accommodate physical limitations, minor renovation, installation, or maintenance for accessibility, safety, or security. Includes pest control services, home finding services, and moving costs. Provides assistance for repairs necessary to assure a Client's independence through the repair of home equipment and appliances. Provides for one-time payment of telephone services, for rent or house payment, deposit for new rental, and home insurance payment. Provides for emergency, unusual, or ongoing utility costs (one month's payment), including installation and monthly telephone service charges (one month's payment). Provides temporary housing or relocation of each Client. Activities may include equipment and labor necessary for the move. These payments shall be for one-time-only. If more than one payment, prior authorization from County Program Manager or designee is required.
- g) *Congregate Nutrition:* Provides meals to Clients who are able to secure meals at a congregate nutrition site. Subrecipient may arrange or provide a meal for a Client in a congregate group setting by an AAA Subrecipient Title III C-1 Nutrition Service Provider. POS for Congregate Nutrition

can only be used if Client does not meet the eligibility criteria for Title III C-1.

- h) *Home-Delivered Nutrition:* Provides home-delivered meals for homebound Clients who are unable to prepare their own meals or do not have someone who can prepare their meals. Subrecipient may provide or arrange services from an AAA Subawarded Title III C-2 nutrition provider. POS for Home-Delivered Nutrition can only be used if Client does not meet the eligibility criteria for Title III C-2.
- i) *Assistive Devices:* Provides for rental or purchase and monthly fee service of electronic communication devices, emergency response equipment, and similar equipment to provide Client access to immediately contact First Responders (does not include regular telephones but adaptive phone equipment which is provided to people with disabilities). Provides for the installation of smoke detectors, portable ramps, and grab bars. Provides items such as body braces, orthopedic shoes, walkers, wheelchairs, and installation of safety devices in the home.
- j) *Assisted Transportation:* Provides one-to-one Client escort transportation services to a Client who has physical and/or cognitive difficulty using regular vehicular transportation. Client may be transported to various health appointments and to social events/resources, such as senior/community centers. Transportation providers must have vehicle insurance and a valid and appropriate California Driver's License.
- k) *Special Needs:* Provides a Client with food staples when a Client is functionally impaired by virtue of a special circumstance that has occurred within the

past twelve (12) months. This may include restaurant-purchased meals when special circumstances necessitate the purchase, and food stamps for eligible Clients under Special circumstances. Provides interpreter and/or translator services. Provides for essential clothing, toiletries, and similar personal care items for use in the home.

- l) *Employment/Recreation/Education:* Provides funding for employment development, recreational and educational activities, and supplies for participation in job training, work activity, rehabilitation, and self-improvement. Provides for specialized training, which, in addition to in-home and community skills training, includes training in Braille, sign language, driver education, etc.
- m) *Medical Services:* Provides physician, nursing care, therapy, health aide services, and medical social services. Private health professionals shall be California State licensed and/or certified, whichever is appropriate. Provides for filling or refilling of prescriptions. Provides for medications prescribed by a physician that are not covered by Medi-Cal or other services. Also provides medi-sets (containers that store a daily/weekly dose of medications) and over-the-counter items such as incontinence supplies, vitamins, aspirin, etc., essential to a Client's well-being.
- n) *Protective Services:* Provides supervision or protection for Clients who are unable to protect their own interests; whose income or resources are being exploited; who are harmed, threatened with harm, neglected or maltreated by others; who have been caused physical and/or mental injury as a result of an action or an inaction by another person or by their own actions due to ignorance, illiteracy, incompetence, or poor

health; or who are lacking in adequate food, shelter, or clothing. Provides information to Clients about money management and financial resources such as financial counseling and assistance, and legal and medical assistance related to establishing a conservatorship. Protective Services may be provided by private, profit, or non-profit agency, and a substitute payee may be full-time or may provide Protective Services on a periodic basis.

- o) *Social and Reassurance*: Provides Clients with telephone contact, home visits and other Social and Reassurance Services. Social and Reassurance Services provide periodic contact and safety checks to reassure and support each Client who may be homebound or isolated. Social and Reassurance Services shall be provided by a staff or volunteer of Subrecipient other than Subrecipient's Care Manager.
- p) *Personal Care*: Provides assistance with non-medical personal services such as bathing, hair care, etc.
- q) *Homemaker*: Provides household support such as cleaning, laundry (including commercial laundry or dry cleaning firm), shopping, food preparation, light household maintenance (changing light bulbs, furnace filters, etc.).
- r) *Chore*: Provides periodic maintenance to Client for chores, such as heavy cleaning, washing windows, trimming trees, mowing lawns, and removal of rubbish and other substances to assure hazard free surroundings.
- s) *Counseling*: Group and/or individual counseling for Clients, including peer counseling. Counseling may include



biofeedback, substance abuse, etc., or therapeutic counseling.

- 10.8.4.3.3 All POS shall be reported by Subrecipient using the Linkages Purchase of Services POS Report form (LF-8) (Attachment L of Appendix C – SOW Exhibits). Subrecipient shall only report the actual Program Services received and the cost as verified by an invoice from the vendor. The projected Program Services shall not be reported on this form. The LF-8 form is used to report the cost of the purchase using Subaward funds and Client contribution.
- 10.8.4.3.4 The Client's share of cost for Program Services is considered a POS only when Subaward funding and/or other funds pay a portion and the Client pays a portion.
- 10.8.4.3.5 If a Client pays for the entire purchase, it is considered an Arranged Service and Subrecipient is to report it on the Service Arrangement Report (SAR) form (LF-7) (Attachment K of Appendix C – SOW Exhibits).
- 10.8.4.3.6 Due to limited POS resources, Care Managers shall give priority to Purchase of Services that can stabilize a Client, but are not ongoing. These may be one-time-only Purchase of Services or those required for a short period of time.
- 10.8.4.3.7 POS are to be made for a Client after the need for the Program Service has been identified in a Client's Care Plan. The maximum amount Subrecipient may spend for the actual Purchase of Service being purchased for any one Client shall not exceed \$800.00 in any fiscal year without prior approval of County Program Manager or designee of County. The need for the Program Service must be specified in the Care Plan prior to purchasing.

- 10.8.4.3.8 Funds for POS shall be allocated by Subrecipient in Subrecipient's Budget (Exhibit W) of Appendix A (Sample Subaward). POS may only be purchased with:
- a) Linkages Subaward funds.
  - b) Partial payment by a Client.
- 10.8.4.3.9 POS does not require competitive bids; however, Subrecipient shall initiate vendor agreements for frequently used POS to lower costs and to ensure the costs are reasonable. This will ensure consistent unit measurement, costs, and description of Program Services provided.
- 10.8.4.3.10 Subrecipient shall verify the cost of all POS authorized in a Client's Care Plan with the Client before the payment is made.
- 10.8.4.3.11 Client equipment cannot be purchased by Subrecipient in advance of need and stockpiled. Accumulation of this nature will be subject to disallowance. If Subrecipient has a unique situation, such as purchasing transportation vouchers, Subrecipient may request consideration from County and, upon approval, Subrecipient may purchase the Program Service. The request, including specific details, shall be in writing to County and in advance of the purchase.
- 10.8.4.3.12 Any payment for rent, house payment, home insurance, or any rental or utility deposit made by Subrecipient shall only be authorized for a one-time-only purchase. For additional payments required on behalf of a Client, the Care Manager shall secure pre-approval from the Project Manager or Clinical Supervisor. In addition, County pre-approval is required on all additional payments required on behalf of a Client. If a refund from the housing or utility provider is

granted to a Client, it shall be paid as a reimbursement to the Linkages Program.

- 10.8.4.3.13 POS for nutritional supplements require a Client's physician's authorization. Subrecipient is required to obtain physician authorization prior to purchasing nutritional supplements. Nutritional supplements are to be used to supplement a Client's diet, not to replace food. Purchases of nutritional supplements will be subject to review during County site visitation/monitoring of Subrecipient.
- 10.8.4.3.14 Food vouchers (gift certificates) purchased through grocery stores, discount food retailers, etc. are not allowed as POS except in an emergency situation, such as a lack of food which may impose a life threatening health risk. Such an emergency situation shall be documented in each Client's file. The vouchers must be purchased for Program Services for each Client on a one time-only basis.
- 10.8.4.3.15 If POS are provided through an independent provider, the Client is the "employer." Subrecipient shall pay for the POS as a reimbursement to the Client. Client or Family members on Medi-Cal who receive payment should be advised to consult with their respective Medi-Cal eligibility worker regarding the impact of receiving payment on their continuing public benefit eligibility.

## 10.9 Monitoring / Follow-Up

- 10.9.1 Subrecipient must meet each Client face-to-face on a quarterly basis, or more often as needed. Need is determined by the Care Manager's interaction(s) with Client. Telephone calls by Subrecipient to each Client shall be made during the months that no face-to-face contact occurs. The intent of these contacts is two-fold: to monitor and assess the efficacy of the Program Service(s) arranged, and to assess the need for additional Program Service(s) or referrals. Every contact date

with each Client must be recorded in the Progress Notes section of each Client's Care Plan.

- 10.9.2 Subrecipient's Clinical Supervisor or Project Manager shall ensure that contacts are made more frequently than quarterly to a Client whose condition requires closer supervision. This determination shall be made during the Care Planning session, and the Care Manager shall present a monitoring schedule that is approved by the Project Manager or Clinical Supervisor and it shall be included in the Care Plan.
- 10.9.3 E-mail contact with a Client in lieu of telephonic contact is only acceptable as a substitute for the monthly telephone contact after a Client's situation is discussed in a Care Plan meeting and e-mail contact is approved by the Clinical Supervisor. E-mail contact should be clinically appropriate and each Client should be apprised of the limits of the potential confidentiality of email correspondence and agree to this mode of contact. The approval of the use of e-mail must be recorded in the Progress Notes. Subrecipient shall be required to receive an acknowledgment from each Client that the email was received and read by the Client by returned email and/or by phone call.

#### 10.10 Reassessment

- 10.10.1 Reassessment is a formalized method of documenting and analyzing changes to each Client during the period since the previous Assessment and assuring that each Client's needs are being met. A Reassessment requires a home visit and interview with each Client by Subrecipient. This information must be documented in the Reassessment form.
- 10.10.2 Subrecipient's Care Manager shall conduct a formal Reassessment of each Client every six (6) months from the last assessment or reassessment.
  - 10.10.2.1 A Reassessment may also be conducted during the year at any time a Client's situation changes or a significant event occurs that warrants a Reassessment. This includes changes in a Client's medical, functional, or psychosocial condition based on changes documented in the data listed in the Universal Intake Form (See Attachment D of Appendix C-Statement of Work Exhibits) as listed in Sections 10.10.3 and 10.10.4 and as determined by the Care Manager's interaction with the Client.

- 10.10.3 In each Reassessment, Subrecipient shall continue to verify a Client's eligibility by using the appropriate Intake/Screening and Assessment tool. All information obtained previously must be verified and/or revised.
- 10.10.4 A new Universal Intake Form (Attachment D of Appendix C – SOW Exhibits) shall be completed at the time of Reassessment and entered into MIS.
- 10.10.5 As part of each Reassessment, Subrecipient shall modify the Care Plan, if indicated, to reflect each Client's current status. If changes are not indicated, Subrecipient must include documentation in the Care Plan to reflect that the Care Plan has been reviewed and that the Client agrees to the continuation of the current Care Plan. Such documentation must be signed by Client and/or Responsible Other.
- 10.10.6 A new Application and Informed Consent form is not required for each Reassessment. However, if (1) Subrecipient needs to obtain or release new Client information or (2) the date of the previous Release(s) exceeds one year, a new Authorization to Release Records form shall be completed and signed by each Client and/or Responsible Other.
- 10.10.7 Subrecipient's Care Manager shall complete the Linkages Reassessment Summary form (LF-6) (Attachment J of Appendix C – SOW Exhibits) after each Reassessment and put it in each Client's file. The Reassessment Summary provides an update on significant changes for each Client and his/her situation since the last Assessment. A significant change is one that results in changes to a Client's medical, functional, or psychosocial condition based on changes documented in the data listed in the Universal Intake Form (UIF) as listed in Sections 10.109.3 and 10.10.4, and as determined by the Care Manager'

#### 10.11 Client Termination

- 10.11.1 A Client termination from the Linkages Program may be either voluntary or involuntary. A Client has the right to leave the Program at any time (voluntary termination). If a Client's termination is involuntary, the Client has the right to grieve through a formal Client Grievance Process (as specified in SOW Section 10.13) developed by Subrecipient.
- 10.11.2.1 At a minimum Subrecipient's Client Termination Process shall include the following:

10.11.2.1.1 Time frame within which Services will be terminated.

10.11.2.1.2 Written notification to the Client of the termination, including the reason for termination. Notification shall also include statement that the Client may appeal to County if dissatisfied with the termination. County, in its sole discretion, may overturn Subrecipient's Termination of a Client.

10.11.2 Subrecipient's Client Termination Process shall be posted in a conspicuous public location, such as a Subrecipient's public lobby and accessible for review, and Subrecipient shall ensure that each Client or each Client's Responsible Other is aware of the procedures. Notification shall be posted in English and any primary language shared by a significant number of Clients. Public postings and written notifications are subject to approval by County.

10.11.3 Cause for Termination.

10.11.3.1 If a Client is maintained in the Linkages Program because certain Program Services are required, and his/her condition has stabilized enough to function without Linkages Program Services, Subrecipient must make every effort to secure the services outside of the Linkages Program and terminate the Client from the Linkages Program.

10.11.3.2 Clients may be terminated from the Linkages Program under any of the following circumstances:

10.11.3.2.1 All items in the Client's Care Plan have been met.

10.11.3.2.2 Client's condition has improved or stabilized and Client no longer requires or is no longer eligible for Program Services.

10.11.3.2.3 Client is stabilized through services provided outside of the Linkages Program.

10.11.3.2.4 Client requires higher level of service – i.e., transitioned to Multipurpose Senior Services Program (MSSP).

10.11.3.2.5 Client requires long-term institutionalization.

10.11.3.2.6 Client's needs exceed Program capacity.

10.11.3.2.7 Client no longer desires Program Services.

10.11.3.2.8 Client moved out of Subrecipient's Program Service area.

10.11.3.2.9 Client dies.

10.11.3.2.10 Client became unwilling or unable to follow the Care Plan. If a Client initially agrees to the Care Plan, but subsequently becomes unwilling or unable to follow the Care Plan, the case may be closed if the following conditions have been met:

a) A modified Care Plan was offered and discussed by the Care Manager with the Client;

b) Counseling was provided to assist the Client and/or informal support to accept the revised Care Plan;

c) Client no longer benefits from the Program as demonstrated by the Client's unwillingness or inability to follow the Care Plan;

d) Referral to other appropriate agencies has been initiated; or

e) Other reasons as approved in writing by County.

10.11.3.3 Subrecipient may only terminate Clients from the Linkages Program for reasons defined in Section 10.11.3.2 above. Under no circumstances may a Subrecipient terminate a Client solely because of a condition not listed in Section 10.11.3.2 such as substance abuse or chronic mental illness.

10.11.4 Termination Conference: Prior to termination, Subrecipient shall discuss with the Client and/or Responsible Other the decision to

terminate a Client for cause under the above termination criteria and Subrecipient shall document the discussion to terminate the Client in the Client's Care Plan. The Termination Conference shall include:

10.11.4.1 The basis for termination;

10.11.4.2 Information on agencies that could provide alternate services; and

10.11.4.3 The process for re-entry into the Program.

10.11.5 Notice of Action: Regardless of the basis for termination, Subrecipient shall develop and provide a written Notice of Action to all terminated Clients and/or Responsible Other, as well as Client's Informal Support and conservator as applicable, upon termination. The only exception is upon Client death. Subrecipient shall document the termination and Notice of Action in the Care Plan and retain a copy in the Client Record. The Notice of Action shall document:

10.11.5.1 The basis for termination;

10.11.5.2 The Client's name, address, and telephone number;

10.11.5.3 Information on readmission to the Program if the terminated Client's condition or circumstances change. Subrecipient is required to perform a re-evaluation prior to re-admission into the Program;

10.11.5.4 Information on how to file a grievance against Subrecipient if the terminated Client disagrees with Subrecipient decision. This shall include the name, address and telephone number of a contact at Subrecipient agency, as well as County contact information.

10.11.6 Subrecipient shall deactivate Clients from MIS if services are no longer needed.

## 10.12 Re-Enrollment in the Linkages Program

10.12.1 Subrecipient may re-enroll a former Client in the Linkages Program if changes indicate re-enrollment is warranted. The same eligibility requirements that apply to new Clients must be met. If the former Client is to be re-enrolled within the same fiscal year of the last Assessment date and there has been no significant change in the Client's medical, functional, or psychosocial condition, the former Client may be re-



- enrolled based on the prior Assessment. However, if the former Client is to be re-enrolled one (1) fiscal year or longer from the date the former Client was a Client and/or the former Client had a significant change in the medical, functional, or psychosocial condition as of the last Assessment date, Subrecipient shall conduct a new Assessment.
- 10.12.2 For all re-enrollments, a new Universal Intake Form must be signed and the Client's Care Plan must be updated to include the Client's current needs. The original Client number shall be used for a re-enrolled Client.

### 10.13 Grievance Process

- 10.13.1 Subrecipient will develop, implement and maintain a formal procedure for the resolution of complaints from Clients or a Client's Responsible Other (The Client Grievance Process). The Client Grievance Process shall be consistent with the procedures required in Section 7400 of Title 22 of the California Code of Regulations.
- 10.13.1.1 Clients shall be permitted to file Grievances or Complaints regarding, but not limited to, any of or all of the following:
- 10.13.1.1.1 Amount or duration of Program Service(s).
  - 10.13.1.1.2 Denial or discontinuance of Program Service(s).
  - 10.13.1.1.3 Dissatisfaction with the Linkages Program Service(s) being provided by Subrecipient, or with the absence/lack of direct Program Services provided by Subrecipient. If the complaint involves an issue of professional misconduct that is under the jurisdiction of another entity, such as the California Medical Board or the State Bar Association, each Client shall be referred to the proper entity.
- 10.13.1.2 At a minimum Subrecipient's Client Grievance Process shall include the following:
- 10.13.1.2.1 Time frame within which complaints will be acted on.
  - 10.13.1.2.2 Written notification to the Client of the results, including a statement that the Client

may appeal to County if dissatisfied with the results of Subrecipient's review.

10.13.1.3 Subrecipient's Client Grievance Process shall be posted in a conspicuous public location, such as a Subrecipient's public lobby and accessible for review, and Subrecipient shall ensure that each Client or each Client's Responsible Other is aware of the procedures. Notification shall be posted in English and any primary language shared by a significant number of Clients. Public postings and written notifications are subject to approval by County.

10.13.1.4 Subrecipient shall provide a copy of any grievances to County.

#### 10.14 Emergency and Disaster Preparedness

10.14.1 Notwithstanding Subrecipient's and County's Subaward objective to provide Program Services to eligible persons, Subrecipient shall make Program Services available to any person impacted by a nationally-declared or state-declared emergency event, contingent upon the availability and commitment of Federal Emergency Management Agency (FEMA) or State Office of Emergency Services (OES) funds with which to reimburse Subrecipient for funds expended.

10.14.2 Subrecipient must have an emergency plan in place to ensure that there is no disruption in Program Services.

10.14.2.1 Subrecipient must have a written Emergency and Disaster Plan on file describing how Program Services will be maintained during and following the event of a disaster or emergency. Emergency and Disaster Plan Basic Requirements (Attachment M of Appendix C – SOW Exhibits) details minimum requirements of the plan.

10.14.2.2 The written plan must include the following sections:

10.14.2.2.1 Emergency/Disaster Plan Mission

10.14.2.2.2 Business Continuity Plan (BCP)

10.14.2.2.3 Emergency Response Organization Chart

10.14.2.2.4 Roster of Critical Local Contacts

10.14.2.2.5 Communication Plan

- 10.14.2.3 The Emergency and Disaster Plan must be made available to employees, volunteers and sub-Subrecipients for reference before, during, and after the emergency or disaster.
    - 10.14.2.3.1 Subrecipient's key staff members shall have a copy of the emergency and disaster plan easily accessible at all times.
  - 10.14.2.4 Subrecipient shall update the Emergency and Disaster Plan and submit it to the AAA Emergency Coordinator as changes occur and/or on an annual basis.
  - 10.14.2.5 The Emergency and Disaster Plan shall be saved on a flashdrive for easy access and transportability.
  - 10.14.2.6 Subrecipient must maintain an updated registry of Clients with contact information for emergency and disaster purposes. Subrecipient shall use the registry to contact program participants to assess if the participant is safe, needs a referral to an evacuation center or other assistance, and has a plan to stay in a safe and healthy environment.
- 10.14.3 Subrecipient shall complete the Site Emergency Resource Survey (Attachment N of Appendix C – SOW Exhibits) on an annual basis to help identify and assess potential resources in the community to support the service population following a large community emergency or disaster.
- 10.14.3.1 The Site Emergency Resource Survey is to be submitted annually on the last business day in September to the designated AAA Emergency Coordinator.
  - 10.14.3.2 Subrecipient shall submit an updated Site Emergency Resource Survey to the designated AAA Emergency Coordinator as changes occur.
- 10.14.4 Subrecipient shall develop and have on file a written Business Continuity Plan (BCP) that describes how Subrecipient will reduce the adverse impact of any emergency event to Linkages Clients as determined by both the scope of the event (e.g., who and what it affects, and to what extent), and also its duration (e.g., hours, days, months). Subrecipient shall make the BCP available to its

employees, volunteers, and to its Lower Tier Subrecipients for reference before, during, and after such emergency event disruption.

10.14.4.1 The BCP must include a system to track emergency expenditures and emphasize the following:

10.14.4.1.1 Back-up systems for data

10.14.4.1.2 Emergency service delivery options

10.14.4.1.3 Community resources

10.14.4.1.4 Transportation

10.14.5 Subrecipient shall:

10.14.5.1 Designate an Emergency Coordinator to communicate with the AAA Emergency Coordinator or designee in the event of an emergency or disaster, and ensure that the AAA Emergency Coordinator or designee has current contact information for Subrecipient's Emergency Coordinator.

10.14.5.2 Coordinate emergency plans with respective City Emergency Plans and local Office of Emergency Services (OES).

10.14.5.3 Establish alternate communication systems, such as cell phone or text messaging, in the event that the regular communication system is interrupted.

10.14.5.4 Identify lead and support agencies for emergencies and disasters in the local community so that response efforts are coordinated with the appropriate agency.

10.14.5.5 Maintain a current list of support agencies and services (in addition to AAA Subrecipients) in local and neighboring communities to provide Information and Assistance for program participants, their families and representatives, and facility staff.

10.14.5.6 Maintain a current list of agency staff (employees, student interns, volunteers) telephone numbers, e-mail addresses, and emergency contact information.

- 10.14.5.7 Maintain adequate emergency and disaster supplies on site, including emergency first aid supplies.
- 10.14.5.8 Ensure that there are adequate staff and resources to execute the emergency and disaster plan in the event of an emergency or disaster.
- 10.14.5.9 When necessary and practical, use existing cash reserves to temporarily cover emergency and disaster assistance costs such as additional food, supplies, extra home delivered meals, home clean-up and safety, emergency medications, transportation, and other immediate needs including:
  - 10.14.5.9.1 Assisting Older Individuals, disabled adults, and/or any other persons seeking refuge by linking them with medical or emergency services, family, friends, and community-based programs such as the Red Cross or the appropriate government agency(s) that can provide assistance.
  - 10.14.5.9.2 Coordinating services for Older Individuals and disabled adults who may be bedbound, dependent upon dialysis, or have life-threatening, chronic illnesses that require immediate emergency intervention.
  - 10.14.5.9.3 Relocating homebound, high risk Clients to a safe location, and coordinating and arranging emergency transportation to a predetermined location.

#### 10.14.6 Communication Procedures with the AAA.

- 10.14.6.1 Subrecipient must provide a status update to the AAA Emergency Coordinator or designee in the event of an emergency or disaster. The standard communication procedures during and after an emergency or disaster are as follows:
  - 10.14.6.1.1 The AAA Emergency Coordinator will provide information to Subrecipient and request feedback regarding the impact of the emergency or disaster on Clients, program operations, facilities, and where feasible, the

impact on Older Individuals, their family caregivers, individuals with disabilities, and any unmet needs in Los Angeles County (via text message, email, telephone, or any other method that is available).

10.14.6.1.2 Subrecipient will provide information to the AAA Emergency Coordinator regarding the impact of the emergency or disaster and any unmet needs resulting from the event as soon as possible (via text message, email, telephone, or any other method that is available).

10.14.6.1.3 Information received by the AAA Emergency Coordinator will be compiled into a report that will be submitted to the Los Angeles County Board of Supervisors and CDA Disaster Preparedness Coordinator.

#### 10.15 Additional Responsibilities

10.15.1 Subrecipient is responsible for ensuring that its operations meet the requirements delineated below in order to provide the optimal level of Program Services to Clients as prescribed by this Subaward.

10.15.2 Subrecipient shall provide Community Outreach, which is defined as actively providing and disseminating Linkages Program information to the public on what Program Services may be available to potential eligible Clients and shall also market the Program Services to all ethnic groups in each Supervisorial District in which the Program Services are being provided by Subrecipient.

10.15.3 Subrecipient shall ensure that information and assistance on Program Services are provided to all populations including homeless, veterans, and Lesbian-Gay-Bisexual-Transgender (LGBT) Clients.

10.15.4 Subrecipient shall establish procedures to protect all Client information consistent with the terms of this Subaward and all applicable laws, regulations, and any amendments thereto. Subrecipient must have written procedures to protect the confidentiality and privacy of Client information collected for purposes of the Program, in accordance with all applicable laws and regulations, including Title 22 CCR 7500(b). Subrecipient shall not disclose Client information without written consent from the Client.

- 10.15.5 Subrecipient must maintain a cash reserve equal to the amount it would cost to operate the Program for one (1) month. Grant funds may not be included in cash reserves.
- 10.15.6 Subrecipient shall track all Subaward funds and Subrecipient shall provide a tracking of Subaward funds during an audit as indicated in Subparagraph 8.38 (Record Retention, Inspection and Audit Settlement) of Appendix A (Sample Subward).
- 10.15.7 Subrecipient shall establish effective working relationships with other Linkages Providers and AAA Subrecipients in Los Angeles County in order to ensure comprehensive and coordinated service delivery and to prevent unnecessary duplication of Program Services.
- 10.15.8 Subrecipient shall maintain a list of all active Clients enrolled and receiving Linkages Program Services (Subrecipient's caseload).
  - 10.15.8.1 For reporting and administrative purposes, the following rules and terms apply to Subrecipient's caseloads.
    - 10.15.8.1.1 "Monthly Active Client Count" represents the number of Clients served during the month. This is defined as the number of Clients enrolled as of the first of the month, plus the number of new Clients enrolled during the month.
    - 10.15.8.1.2 At all times, Subrecipient's caseload, shall include a mixture of functionally impaired adults, and at-risk elderly, and both Medi-Cal and non-Medi-Cal eligible Clients based on the demographics of the area in which Subrecipient is providing Program Services.
    - 10.15.8.1.3 Subrecipient shall also update Client information in MIS.
- 10.15.9 Subrecipient shall serve the Client without a limitation on the length of time Client receives Program Services. Clients may remain in the Program as long as the need for Linkages Program Services exists, the eligibility criteria continue to be met, and funding is available.
- 10.15.10 Subrecipient must enter the Units of Service for Program Services delivered to Clients into the County's Management Information System (MIS). The Unit of Service is the representation of the output (benefit/service) provided to the Client. This measurement forms the



basis upon which payment is made to Subrecipient. The Unit Rate is the amount that is payable by the County for each Unit of Service provided by Subrecipient.

10.15.11 Subrecipient is required to make Client referrals for Nutrition Counseling, either in person, by FAX, phone or email, to the DASS Subrecipient for all Clients who are diabetic or score six (6) and above on the Nutrition Risk Score in the Universal Intake Form (Attachment D of Appendix C – SOW Exhibits).

10.15.12 Unit of Measurement: Linkages Program Services consist of the following categories of Program Services. The rates indicated in the chart below reflect the maximum dollar amount that is reimbursable for each Program Service.

<b>PROGRAM SERVICES</b>	<b>UNIT OF MEASUREMENT</b>	<b>MAXIMUM UNIT RATE OF REIMBURSEMENT</b>
Intake/Screening	<b>One (1) Hour</b>	<b>\$28.00</b>
Assessment	<b>One (1) Hour</b>	<b>\$49.00</b>
Reassessment	<b>One (1) Hour</b>	<b>\$49.00</b>
Care Planning	<b>One (1) Hour</b>	<b>\$49.00</b>
Coordination of: Informal Support Services/ Arranged Services / Purchase of Services	<b>One (1) Hour</b>	<b>\$49.00</b>
Purchase of Services	<b>One (1) Occurrence</b>	<b>Actual Cost of Service Provided, annual maximum of \$800/Client</b>
Monitoring / Follow-up	<b>One (1) Hour</b>	<b>\$49.00</b>
Client Termination	<b>One (1) Hour</b>	<b>\$49.00</b>

10.15.12.1 Hours shall be tracked in actual time spent providing the Program Services not rounded up to the nearest whole.

10.15.12.2 To determine the decimal value for a portion of an hour, the actual minutes of Service shall be divided by sixty minutes. As an example, 30 minutes would reflect in the MIS as .5 units. ( $30/60=.5$ ).

10.15.12.3 POS Unit of Measurement shall be as follows: One (1) Service event = One (1) occurrence.

10.15.12.4 Program Services, Unit of Measures, and Rate Summary:

10.15.12.4.1 For reporting purposes, POS will be recorded in MIS using the Unit of Measurement and Actual Costs for dollars to be reimbursed.

10.15.12.4.2 Total POS shall not exceed \$800 for a Client in a FY without prior approval from County.

#### 10.16 Multipurpose Senior Centers

10.16.1 If Subrecipient operates a Multipurpose Senior Center as defined under Title 42 USCS Section 3002, Subrecipient must adhere to all applicable Los Angeles County, State of California, and Federal guidelines and regulations, including, but not limited to, Title 22 CCR Sections 7550 – 7562.

10.16.2 If Subrecipient operates a Multipurpose Senior Center, Subrecipient shall also comply with the provisions contained in the following acts:

10.16.2.1 Copeland "Anti-Kickback" Act (18 USCS 874) (29 CFR, Part 3).

10.16.2.2 Davis-Bacon Act (40 USCS 3141-3142) (29 CFR, Part 5).

10.16.2.3 Contract Work Hours and Safety Standard Act (40 USCS 327-332) (29 CFR, Part 5).

10.16.2.4 Executive Order 11246 of September 14, 1965, entitled "Equal Employment Opportunity" as amended by Executive Order 11375 of October 13, 1967, as supplemented in the Department of Labor Regulations (41 CFR, Part 60).

10.16.3 Authorized County, State or Federal representatives shall have the right to monitor Subrecipient's performance relating to acquisition, alteration, renovation, or construction pursuant to this Subaward. This kind of monitoring shall include, but not be limited to, inspections of premises (acquired, altered, renovated, or constructed) and

interviews with Project Manager and staff during normal business hours.

10.16.4 Subrecipient assures that when an existing facility has been altered with funds made available by this Subaward and is used as a Multipurpose Senior Center, the period of time in which such facility must be used as a Multipurpose Senior Center is as follows:

10.16.4.1 Not less than three (3) years from the date the Subaward terminates where the amount of the Subaward or award of funds including the non-federal share does not exceed \$30,000.

10.16.4.2 If the Subaward amount or award of funds exceeds \$30,000, the fixed period of time shall increase one (1) year for each additional \$10,000, or part thereof, to a maximum of \$75,000.

10.16.4.3 For Subaward amounts, or award of funds, including the non-federal share, that exceed \$75,000, the fixed period of time shall be not less than ten (10) years from the date Subaward expires or terminates.

#### 10.17 Customer Satisfaction Surveys

10.17.1 Subrecipient shall conduct ongoing Customer Satisfaction Surveys with Clients and retain copies of all surveys on file and accessible to County for review. The results of the surveys will be used by Subrecipient to make quality improvements in Program Services provided to all Clients. Subrecipient may be asked by County to comply with and develop other outcome measures.

10.17.2 Customer Satisfaction Survey shall be provider-specific and be distributed to all Linkages Clients each year.

#### 10.18 Voluntary Contributions

10.18.1 Subrecipient shall develop and implement a method to enable Clients to voluntarily contribute to the cost of the Program.

10.18.1.1 Subrecipient shall clearly inform each Client that there is no obligation to contribute, and that any contributions they make are strictly voluntary.

- 10.18.1.2 Subrecipient must have a mechanism in place to ensure that the privacy and confidentiality of each Client is protected whether or not they choose to make a contribution.
- 10.18.1.3 Volunteers and/or staff at the sign-in table (if applicable) must be trained on the donation policy, emphasizing the confidential nature of any contributions.
- 10.18.2 Clients contributions received may be used for Program Services. However, Subrecipient acknowledges that any contributions will not reduce the Subaward amount and shall only be used to supplement, not supplant, Program funds.
- 10.18.3 Subrecipient shall establish written procedures to protect contributions and fees from loss, mishandling, and theft. Such procedures shall be kept on file at Subrecipient's site.
- 10.18.4 Subrecipient shall separate collected contributions from Subaward funding. All contributions and fees shall be identified as Program Income and used to increase the number of Clients served, facilitate access, and/or provide supportive services.
- 10.18.5 All records of contributions, written procedures governing solicitation of funds, solicitation materials, or other contribution-related records shall be held pursuant to record retention policies outlined in Subparagraph 8.38 (Record Retention, Inspection and Audit Settlement) of Appendix A (Sample Subward).
- 10.18.6 Subrecipient shall ensure that Clients are not required to contribute to the Program when they are requesting or receiving Services. Subrecipient shall ensure that any solicitation of voluntary contributions shall not be coercive. Clients shall not be denied Program Services based on their inability or unwillingness to contribute.
  - 10.18.6.1 The following practices pertaining to voluntary contributions **are not allowed**:
    - 10.18.6.1.1 Tracking donations by accounts receivable.
    - 10.18.6.1.2 Tracking donations by individual Clients.
    - 10.18.6.1.3 Pamphlets and websites that state that payment is required for Program Services or

state a monetary amount for Program Services.

- 10.18.6.1.4 Employing tactics, in any way, that could be viewed as embarrassing to Clients and/or obligatory requests for donations.
- 10.18.6.1.5 Employing tactics such as allowing volunteers to guard the collection boxes or having Clients sign in and pay before receiving Services.
- 10.18.6.1.6 At the time of the intake interview, compelling a Client to pledge a particular amount as an agreed upon donation.
- 10.18.6.1.7 Using coercion to solicit voluntary contributions.
- 10.18.6.1.8 A donation request resembling a billing statement or invoice.
- 10.18.6.1.9 Imposing a suggested contribution rate based on Client's income.

## 10.19 Client Record

10.19.1 Client Record: The Client Record consists of the following documents that must be utilized by the Care Manager, and maintained on file, subject to review by County and in accordance with the recordkeeping requirements under this Subaward in Paragraph 8.38 (Record Retention and Inspection, and Audit Settlement).

- 10.19.1.1 Universal Intake Form (UIF) (Attachment D of Appendix C – SOW Exhibits)
- 10.19.1.2 Care Management Application and Informed Consent form (LF-1) (Attachment E of Appendix C – SOW Exhibits)
- 10.19.1.3 Linkages Authorization to Release Records form (LF-2) (Attachment F of Appendix C – SOW Exhibits)
- 10.19.1.4 Linkages Initial Assessment form (LF-3) (Attachment G of Appendix C – SOW Exhibits)

- 10.19.1.5 Linkages Assessment Summary form (LF-4) (Attachment H of Appendix C – SOW Exhibits)
- 10.19.1.6 Linkages Reassessment form (LF-5) (Attachment I of Appendix C – SOW Exhibits)
- 10.19.1.7 Cognitive Assessment
- 10.19.1.8 Linkages Reassessment Summary form (LF-6) (Attachment J of Appendix C – SOW Exhibits)
- 10.19.1.9 Service Arrangement Report (SAR) form (LF-7) (Attachment K of Appendix C – SOW Exhibits)
- 10.19.1.10 Linkages Purchase of Services (POS) Report form (LF-8) (Attachment L of Appendix C – SOW Exhibits)
- 10.19.1.11 Care Plan
- 10.19.1.12 Client Progress Notes and other Client related information (e.g. correspondence, medical/psychological/social records)
- 10.19.1.13 Termination Notice, if any

## **11.0 GREEN INITIATIVES**

- 11.1 Subrecipient shall use reasonable efforts to initiate “green” practices for environmental and energy conservation benefits.
  - 11.1.1 Subrecipient shall purchase products that minimize environmental impacts, toxins, pollution, and hazards to worker and community safety to the greatest extent practicable.
  - 11.1.2 Subrecipient shall purchase, to the extent possible, products that include recycled content, are durable and long-lasting, conserve energy and water, use agricultural fibers and residues, reduce greenhouse gas emissions, use unbleached or chlorine free manufacturing processes, and use wood from sustainable harvested forests.
  - 11.1.3 Subrecipient shall support strong recycling markets, reduce materials that are put into landfills, and increase the use and availability of environmentally preferable products that protect the environment.

- 11.2 To the extent practicable, Subrecipient shall not use cleaning or disinfecting products (i.e. for janitorial use) that contain ingredients that are carcinogens, mutagens, or teratogens. These include chemicals listed by the U.S. Environmental Protection Agency or the National Institute for Occupational Safety and Health on the Toxic Release Inventory and those listed under Proposition 65 by the California Office of Environmental Health Hazard Assessment.
- 11.3 Subrecipient shall notify County's Program Manager of Subrecipient's new green initiatives prior to the Subaward commencement.

## **12.0 PERFORMANCE REQUIREMENTS SUMMARY**

All listings of Services used in the Performance Requirements Summary (PRS) Chart (Attachment A of Appendix C – SOW Exhibits) are intended to be completely consistent with the Subaward and this SOW, and are not meant in any case to create, extend, revise, or expand any obligation of Subrecipient beyond that defined in the Subaward or this SOW. In any case of apparent inconsistency between services as stated in the Subaward or this SOW and the PRS, the meaning apparent in the Subaward or this SOW will prevail. If after a request to review by Subrecipient, County determines any Services identified in the PRS = are not clearly identified in the Subaward or this SOW, the identified service will be considered null and void and place no requirement on Subrecipient.